



COMPLETION REPORT

	DAM PERMIT NO.:
	DATE APPROVED:
approved plans and specifications:	s been built and was completed in accordance with the
APPLICANT:	
NAME OF DAM:	
NAME OF STREAM:	
MUNICIPALITY:	
COUNTY:	
COMPLETION DATE:	
	Signature of Engineer & Embossed Seal
	New Jersey License Number
	Date
A complete set of as built plans and	specifications must accompany this completion

A complete set of as built plans and specifications must accompany this completion report.

Please complete and return to: State of New Jersey

Bureau of Dam Safety & Flood Control

P.O. Box 419 Trenton, NJ 08625

Dam Safety Section

Tel No: 609-984-0859 Fax No: 609-984-1908

E-mail: Damsafety@dep.state.nj.us Web: www.state.nj.us/dep/damsafety

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